

United States Bankruptcy Court  
Northern District of Illinois

## Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Spiewak, Andrzej	Name of Joint Debtor (Spouse) (Last, First, Middle): Spiewak, Eva
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) xxx-xx-4380	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-5567
Street Address of Debtor (No. and Street, City, and State): 470 Shagbark Court Roselle, IL	Street Address of Joint Debtor (No. and Street, City, and State): 470 Shagbark Court Roselle, IL
ZIP Code 60172	ZIP Code 60172
County of Residence or of the Principal Place of Business: DuPage	County of Residence or of the Principal Place of Business: DuPage
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code

<b>Type of Debtor</b> (Form of Organization) (Check one box)	<b>Nature of Business</b> (Check one box)	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)
<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:	<b>TAX-EXEMPT ENTITY</b> (Check box, if applicable)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<b>Nature of Debts</b> (Check one box)  <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  <input type="checkbox"/> Debts are primarily business debts.

<b>Filing Fee</b> (Check one box)	<b>Chapter 11 Debtors</b>
<input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Check one box:  <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  Check if:  <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 ( <i>amount subject to adjustment on 4/01/16 and every three years thereafter</i> ).  Check all applicable boxes:  <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).

<b>Statistical/Administrative Information</b>	THIS SPACE IS FOR COURT USE ONLY
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.	
<b>Estimated Number of Creditors</b>	
<input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000	
<b>Estimated Assets</b>	
<input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	
<b>Estimated Liabilities</b>	
<input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Spiewak, Andrzej Spiewak, Eva
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)		
Location Where Filed: - None -	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet)		
Name of Debtor: - None -	Case Number:	Date Filed:
District:	Relationship:	Judge:
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		<b>Exhibit B</b>  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>X</b> <u>/s/ Michael J. Worwag</u> <span style="float: right;">December 16, 2014</span> Signature of Attorney for Debtor(s) <span style="float: right;">(Date)</span> Michael J. Worwag
<b>Exhibit C</b>  Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?		
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.		
<b>Exhibit D</b>  (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)		
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.  If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.		
<b>Information Regarding the Debtor - Venue</b>  (Check any applicable box)		
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.		
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b>  (Check all applicable boxes)		
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)		
<hr/> (Name of landlord that obtained judgment)		
<hr/> (Address of landlord)		
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).		

B1 (Official Form 1)(04/13)

**Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

Spiewak, Andrzej

Spiewak, Eva

**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ Andrzej Spiewak

Signature of Debtor Andrzej Spiewak

**X** /s/ Eva Spiewak

Signature of Joint Debtor Eva Spiewak

Telephone Number (If not represented by attorney)

December 16, 2014

Date

**Signature of Attorney\*****X** /s/ Michael J. Worwag

Signature of Attorney for Debtor(s)

Michael J. Worwag #6256887

Printed Name of Attorney for Debtor(s)

Worwag &amp; Malysz, P.C.

Firm Name

The Peoples Advocates  
2500 E. Devon Ave #300  
Des Plaines, IL 60018

Address

Email: mjworwag@gmail.com

847.954.2350 Fax: 847.954.2755

Telephone Number

December 16, 2014

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

**X**

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person,or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.*

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court  
Northern District of Illinois**

In re Andrzej Spiewak  
Eva Spiewak

Debtor(s)

Case No.  
Chapter 7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ Andrzej Spiewak  
Andrzej Spiewak

Date: December 16, 2014

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court  
Northern District of Illinois**

In re Andrzej Spiewak  
Eva Spiewak

Debtor(s)

Case No.  
Chapter 7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

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*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ Eva Spiewak  
Eva Spiewak

Date: December 16, 2014

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re Andrzej Spiewak,  
 Eva Spiewak

Case No. \_\_\_\_\_

Debtors

Chapter \_\_\_\_\_

7

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	410,000.00		
B - Personal Property	Yes	4	61,800.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		397,858.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	29		276,237.47	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			4,728.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,694.00
Total Number of Sheets of ALL Schedules		43			
			Total Assets	471,800.00	
			Total Liabilities		674,095.47

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re Andrzej Spiewak,  
 Eva Spiewak

Case No. \_\_\_\_\_

Debtors

Chapter 7

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

**State the following:**

Average Income (from Schedule I, Line 12)	4,728.00
Average Expenses (from Schedule J, Line 22)	4,694.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14 )	4,728.00

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		2,858.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		276,237.47
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		279,095.47

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

## Debtors

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Real Estate Located at 470 Shagbark Court, Roselle IL	Joint tenant	J	410,000.00	370,000.00
60172				

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDEULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Personal Checking account with Chase Personal Checking account with Bloomingdale Bank & Trust Business checking account Bloomingdale Bank & Trust Business checkinga ccount with Chase	J J J J	500.00 300.00 1,500.00 0.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Household Goods, Used Furniture and Personal Electronics	J	3,000.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Used Personal Clothing	J	1,000.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Whole Life Insurance Polic Cash Surrender Value Life insurance policy - wife beneficiary	J J	4,000.00 15,000.00
10. Annuities. Itemize and name each issuer.	X			
			Sub-Total > (Total of this page)	25,300.00

3 continuation sheets attached to the Schedule of Personal Property

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		IRA wife IRA husband	J	0.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		Andrew Spiewak, Inc.  100% Shareholder Beauty & Hair Artistry, LLC -Hair Salon equipment and inventory  100% Shareholder Andrew Spiewak Land Surveyor, Inc.	J J	0.00 5,000.00
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
Sub-Total > (Total of this page)				5,000.00

Sheet 1 of 3 continuation sheets attached  
to the Schedule of Personal Property

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2011 Nissan Versa	J	12,000.00
		2011 Nissan Altima	J	13,000.00
		2008 Honda Odessey 120,000 miles	J	6,500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
Sub-Total >				31,500.00
(Total of this page)				

Sheet 2 of 3 continuation sheets attached  
to the Schedule of Personal Property

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

## Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
35. Other personal property of any kind not already listed. Itemize.	X			

35. Other personal property of any kind not already listed. Itemize. X

Sub-Total >	0.00
(Total of this page)	
Total >	61,800.00

Sheet 3 of 3 continuation sheets attached  
to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

## Debtors

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:

Doctor claims are  
(Check one box)

(Check one box)

11 U.S.C. §522(b)(2)  
 11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Real Property</u>			
Real Estate Located at 470 Shagbark Court, Roselle IL 60172	735 ILCS 5/12-901	30,000.00	410,000.00
<u>Household Goods and Furnishings</u>			
Household Goods, Used Furniture and Personal Electronics	735 ILCS 5/12-1001(b)	1,300.00	3,000.00
<u>Wearing Apparel</u>			
Used Personal Clothing	735 ILCS 5/12-1001(a)	1,000.00	1,000.00
<u>Interests in Insurance Policies</u>			
Whole Life Insurance Policy Cash Surrender Value	215 ILCS 5/238	100%	4,000.00
Life insurance policy - wife beneficiary	735 ILCS 5/12-1001(h)(3)	100%	15,000.00
<u>Stock and Interests in Businesses</u>			
100% Shareholder Beauty & Hair Artistry, LLC - Hair Salon equipment and inventory	735 ILCS 5/12-1001(b)	5,000.00	5,000.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u>			
2011 Nissan Versa	735 ILCS 5/12-1001(b)	0.00	12,000.00
2008 Honda Odyssey 120,000 miles	735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b)	4,800.00 1,700.00	6,500.00

In re Andrzej Spiewak,  
Eva Spiewak

Case No.

## Debtors

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband Wife Joint or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H E B T O R	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 9901871625	J	10/4/10	Purchase Money Security  2011 Nissan Versa				12,878.00	878.00
Bmo Harris Bank Po Box 94034 Palatine, IL 60094								
		Value \$ 12,000.00						
Account No. 102447592780001		4/21/11	Purchase Money Security  2011 Nissan Altima				14,980.00	1,980.00
Nissan Motor Acceptance Po Box 660360 Dallas, TX 75266								
		Value \$ 13,000.00						
Account No. 7080100667443	J	5/27/09	Mortgage  Real Estate Located at 470 Shagbark Court, Roselle IL 60172				370,000.00	0.00
Wells Fargo Home Mortgage 8480 Stagecoach Circle Frederick, MD 21701								
		Value \$ 410,000.00						
Account No.			Value \$					
0 continuation sheets attached			Subtotal (Total of this page)				397,858.00	2,858.00
			Total				397,858.00	2,858.00
			(Report on Summary of Schedules)					

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

### TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

#### Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

#### Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

#### Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

#### Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### Deposits by individuals

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

#### Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

#### Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

#### Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTO	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.			AMOUNT OF CLAIM
			CONTINGENT	UNLIQUIDATED	DISPUTED	
Account No. 11100000096682241			Collection/Chase			0.00
ACI 35A Rust Lane Boerne, TX 78006	J					
Account No. 0201310650F88010X			2013 Medical Bills			5.63
Advocate Health and Hospitals 1775 Dempster St Park Ridge, IL 60068	J					
Account No. 224738			2013 Medical Bills			5.63
Advocate Medical Group 75 Remittance Dr Suite 1773 Chicago, IL 60675	J					
Account No. 47364271-454-8022			Collection/Alexian Brother MC			40.63
Alcoa Billing Center 3429 Regal Dr. Alcoa, TN 37701	J					
Subtotal (Total of this page)						51.89

28 continuation sheets attached

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 41791248-454-8022		Collection				
Alcoa Billing Center 3429 Regal Dr. Alcoa, TN 37701	J					594.00
Account No. G00808227664		Medical Bills				
Alexian Brother Medical Center 22589 Network Place Chicago, IL 60673	J					236.56
Account No. G00808358634		Medical Bills				
Alexian Brother Medical Center 22589 Network Place Chicago, IL 60673	J					376.04
Account No. G00808223101		Medical Bills				
Alexian Brother Medical Center 22589 Network Place Chicago, IL 60673	J					247.32
Account No. 0201233123085210C		2013 Medical Bills				
Alexian Brothers 800 Biesterfield Rd Elk Grove Village, IL 60007-3358	J					13.09
Sheet no. 1 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,467.01

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 0201233123085220C		2013 Medical Bills				16.32
Alexian Brothers 800 Biesterfield Road Elk Grove Village, IL 60007-3397	J					
Account No. 020122585040T500X		2013 Medical Bills				635.04
Alexian Brothers 800 Biesterfield Road Elk Grove Village, IL 60007-3397	J					
Account No. 0212250501H7190X		2013 Medical Bills				64.25
Alexian Brothers 800 Biesterfield Road Elk Grove Village, IL 60007-3397	J					
Account No. 02012222503964G0X		2013 Medical Bills				41.40
Alexian Brothers 800 Biesterfield Road Elk Grove Village, IL 60007-3397	J					
Account No. 00024821		2012 Medical Bills				100.60
Alexian Brothers Behavioral Health 21272 Network Place Chicago, IL 60673	J					
Sheet no. 2 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				857.61

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 0201307450464E60X		2013 Medical Bills				15.60
Alexian Brothers Med. Center 800 Biesterfield Road Elk Grove Village, IL 60007	J					
Account No. 0201306750644G00X		2013 Medical Bills				106.00
Alexian Brothers Med. Center 800 Biesterfield Road Elk Grove Village, IL 60007	J					
Account No. 0201307450464E30X		2013 Medical Bills				28.00
Alexian Brothers Med. Center 800 Biesterfield Road Elk Grove Village, IL 60007	J					
Account No. 020130645036N770X		2013 Medical Bills				190.00
Alexian Brothers Med. Center 800 Biesterfield Road Elk Grove Village, IL 60007	J					
Account No. G00715208252		2011 Medical Bills				100.00
Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673	J					
Sheet no. 3 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			439.60

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. G00804625119		2013 Medical Bills				761.00
Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673	J					
Account No. G00805295854		2013 Medical Bills				584.11
Alexian Brothers Medical Center 3040 W Salt Creek Lane Arlington Heights, IL 60005	J					
Account No. G00804993343		2013 Medical Bills				612.32
Alexian Brothers Medical Center 3040 W Salt Creek Lane Arlington Heights, IL 60005	J					
Account No. G00803871128		2013 Medical Bills				1,291.77
Alexian Brothers Medical Center 22589 Network Place Chicago, IL 60673-1225	J					
Account No. G00801997263		2012 Medical Bills				635.04
Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673	J					
Sheet no. 4 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			3,884.24

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. F00042070219		2012 Medical Bills				110.64
Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673	J	Medica Bill				4,633.10
Account No. G00806432944	J	2013 Medical Bills				48.00
Alexian Brothers Medical Center 3040 Salt Creek Lane Arlington Heights, IL 60005	J	2013 Medical Bills				78.00
Account No. 021307050H87610X		Medical Bills				230.00
Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673	J					
Account No. G00806961728	J					
Alexian Brothers Medical Center 22589 Network Place Chicago, IL 60673						
Sheet no. 5 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				5,099.74

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. G00807116132		Medical Bills				
Alexian Brothers Medical Center 21272 Network Place Chicago, IL 60673	J					15.87
Account No. G00806971958		Medical Bills				
Alexian Brothers Medical Center 22589 Network Place Chicago, IL 60673	J					46.17
Account No. 267853A380		2012 Medical Bills				
Alexian Brothers Medical Group PO Box 5588 Belfast, ME 04915	J					35.60
Account No. 000043330		2013 Medical Bills				
Alexian Ctr for Mental 3436 N Kennicott Ave Arlington Heights, IL 60004	J					407.10
Account No. 5094*2092765.1		Medical Bill/ Collection				
Alliance Laboratory Physicians LTD Po Box 5968 Carol Stream, IL 60197	J					0.00
Sheet no. 6 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				504.74

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 5094*805235854.1		Medical Bill				
Alliance Laboratory Physicians LTD PO Box 5967 Carol Stream, IL 60197	J					54.00
Account No. 02013079504290F0X		2013 Medical Bills				
Alliance Laboratory Physicians LTD PO Box 5967 Carol Stream, IL 60197	J					1.80
Account No. 02013079504434FOX		2013 Medical Bills				
Alliance Laboratory Physicians LTD PO Box 5967 Carol Stream, IL 60197	J					11.70
Account No. 020130785080K480X		2013 Medical Bills				
Alliance Laboratory Physicians LTD PO Box 5967 Carol Stream, IL 60197	J					49.50
Account No. 02012265507Q0890X		2013 Medical Bills				
Alliance Laboratory Physicians LTD PO Box 5967 Carol Stream, IL 60197	J					8.10
Sheet no. 7 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			125.10

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 02012278502S4840X		2013 Medical Bills				
Alliance Laboratory Physicians LTD PO Box 5967 Carol Stream, IL 60197	J					2.62
Account No. 5094*806432944.1		Medical Bills				
Alliance Laboratory Physicians LTD PO Box 5967 Carol Stream, IL 60197	J					142.70
Account No. 252006		Continuous Credit card				
American Express PO Box 0001 Los Angeles, CA 90096	J					1,370.00
Account No. -3499907352269483		Opened 4/08/05 Credit Card				
Amex Po Box 297871 Fort Lauderdale, FL 33329	H					1,781.00
Account No. 3-0551-6513072		Utility				
ARC Disposal-Republic SVC# 551 P.O. Box 9001154 Louisville, KY 40290	J					0.00
Sheet no. 8 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			3,296.32

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 0454-41731248		Collection MEA Elk Grove LLC				
ARS P.O. Box 630806 Cincinnati, OH 45263	J					48.40
Account No. 6309869886197		2013 Utility				
AT & T PO Box 5080 Carol Stream, IL 60197	J					156.19
Account No. 287253476313		2013 Utility				
AT&T Mobility PO Box 6463 Carol Stream, IL 60197	J					133.70
Account No. 1505447		Collection/Medical Bill				
ATG Credit LLC PO Box 14895 Chicago, IL 60614-4895	J					458.00
Account No. 4192000941253809		Opened 10/12/04 Charge account				
Bank Of America Po Box 982235 El Paso, TX 79998	J					34,520.00
Sheet no. 9 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			35,316.29

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE B T O R  H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONT ING ENT	UN LI QU IDA TE D	DIS P U TE D	AMOUNT OF CLAIM
Account No. 5466322638083984		Opened 3/06/90 Credit Card				
Bank Of America Po Box 982235 El Paso, TX 79998	J					12,463.00
Account No.		Collection				
Capital Management Services LP 698 1/2 S Ogden St Buffalo, NY 14206	J					0.00
Account No. 4802137063387718		Opened 8/20/08 Credit Card				
Capital One Po Box 85520 Richmond, VA 23285	H					6,053.00
Account No. 23881		2012 Medical Bills				
Cardiovascular Associates 25883 Network Place Chicago, IL 60673	J					148.00
Account No. 21-56575867		2013 Collection/direct TV				
CBE group 1309 Technology Pkwy Cedar Falls, IA 50613	J					0.00
Sheet no. 10 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			18,664.00

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community					AMOUNT OF CLAIM
			CONTINGENT	UNLIQUIDATED	DISPUTED		
Account No. 4312281004876596	H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Chase Po Box 15298 Wilmington, DE 19850	H	Opened 8/19/08 Charge account					16,603.00
Account No. 4147202057306589	J	Opened 12/08/08 Credit Card					
Chase Po Box 15298 Wilmington, DE 19850	J	Opened 9/26/95 Credit Card					5,033.00
Account No. 4266841225463890	J	Opened 2/01/98 Credit Card					
Chase Po Box 15298 Wilmington, DE 19850	J	Opened 2/01/98 Credit Card					1,472.00
Account No. 4444000128973720	J	Opened 2/01/98 Credit Card					
Chase Po Box 15298 Wilmington, DE 19850	J	2010 Credit Card					669.00
Account No. 5582-5086-3834-1781	J						
Chase PO Box 15153 Wilmington, DE 19886							2,221.32
Sheet no. 11 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)				25,998.32

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community					AMOUNT OF CLAIM
			CONTINGENT	UNLIQUIDATED	DISPUTED		
Account No. 100001414511706859		Credit Card					
Chase 3415 Vision Drive Columbus, OH 43219	J						32,078.93
Account No. 414511706859		2006 Potential deficiency balance from home equity line					
Chase PO Box 901039 Fort Worth, TX 76101	J						0.00
Account No. 11100000966982241		2010 Credit Card					
Chase Bank 340 S Cleveland Ave Bldg 370 Westerville, OH 43081	J						1,514.81
Account No. 1016000083757		Opened 9/16/08 ChargeAccount					
Citi Com Lending Grp/A Po Box 769004 San Antonio, TX 78245	H						108,188.00
Account No. 5424180795148532		Opened 4/01/99 Credit Card					
Citibank Po Box 6241 Sioux Falls, SD 57117	J						20,879.00
Sheet no. 12 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)					162,660.74

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
				H	W	J	C	
Account No. 4339 0403 0192 4662			Charge account					
Citibank P.O. Box 15109 Wilmington, DE 19850	J							74.79
Account No. 7941280018			Utility					
Com Ed PO Box 6111 Carol Stream, IL 60197	J							0.00
Account No. 8771 20 179 0123404			Utility					
Comcast P.O. Box 3002 Southeastern, PA 19398-3002	J							285.12
Account No. 4412540002745809			Opened 12/22/09 Credit Card					
Commerce Bank Po Box 411036 Kansas City, MO 64141	W							7,128.00
Account No. G00803871128			Collection/Medical Bill					
Computer Credit Inc 640 W Fourth Street PO Box 5238 Winston Salem, NC 27113	J							0.00
Sheet no. 13 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)				7,487.91

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 012654		2012 Medical Bills				
Core Orthopedics & Sports Medicine PO Box 51 Palatine, IL 60078	J					40.00
Account No. 08 0343 06294		2012 Collection				
Credit Collection Services 2 Wells Ave Newton Center, MA 02459	J					0.00
Account No. J74170-G32307		2013 Notice				
Creditors Discount 415 E. Main St. Streator, IL 61364	J					0.00
Account No. 67483-G77943		Collection/Elk Grove Radiology				
Creditors Discount 415 E. Main St. Streator, IL 61364	J					0.00
Account No. 076810877		2013 Utility				
Direct TV P.O. Box 78626 Phoenix, AZ 85062	J					443.61
Sheet no. 14 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			483.61

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 23979585		Collection/DirecTv				
Diversified Consultants, Inc P.O. Box 1117 Phoenix, AZ 85062	J					0.00
Account No. 603303959		2013 Medical Bills				
DuPage Medical Group 15921 Collections Center Drive Chicago, IL 60693	J					142.00
Account No. 869337		2013 Medical Bills				
Dupage Medical Group LTP 430 Pennsylvania Ave Glen Ellyn, IL 60137	J					10.00
Account No. 641		2012 Medical Bills				
DX Medical & Physical Clinic 7601 W Montrose Ave Harwood Heights, IL 60706	J					628.00
Account No. 0201306750065J90X		2013 Medical Bills				
Elk Grove Radiology 75 Remittance Dr. Suite 6500 Chicago, IL 60675	J					15.00
Sheet no. 15 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			795.00

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. EGR A0756022C		2013 Medical Bills				193.00
Elk Grove Radiology SC PO Box 4543 Carol Stream, IL 60197	J					
Account No. EGR A0756022B		2013 Medical Bills				39.00
Elk Grove Radiology SC PO Box 4543 Carol Stream, IL 60197	J					
Account No. EGR A0756022A		2012 Medical Bills				24.80
Elk Grove Radiology SC PO Box 4543 Carol Stream, IL 60197	J					
Account No. EGR A0475407A		2013 Medical Bills				195.00
Elk Grove Radiology SC PO Box 4543 Carol Stream, IL 60197	J					
Account No. 02013073501K7950X		2013 Medical Bills				24.00
Elk Grove Radiology SC PO Box 4543 Carol Stream, IL 60197	J					
Sheet no. 16 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 475.80

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. EGR A0756022D		Medical Bills				
Elk Grove Radiology SC 9410 Compubill Dr Orland Park, IL 60462	J					8.00
Account No. 1307300345		2013 Collection				
Euler Hermes UMA 600 South 7th Street Louisville, KY 40201	J					0.00
Account No.		2013 Credit Card				
Faith Dental Group LTD Matthew J. Faith DDS 1645 Irving Park Hanover Park, IL 60133	J					35.00
Account No. 21482		2010 Notice				
Family Medical Center Westchester 2434 S Wolf Rd Westchester, IL 60154	J					0.00
Account No. 3164163		2013 Notice				
Financial Corporation of Austin PO Box 203500 Austin, TX 78720	J					89.40
Sheet no. 17 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				132.40

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 24069329		Collection/Amx				
First Source 205 Bryant Wood South Buffalo, NY 14228	J					0.00
Account No. 02014007508J4750X		2013 Medical Bills				
Halina Kalinowska MD 800 Biesterfield Rd Elk Grove Village, IL 60007	J					146.00
Account No. 0201319750P14710X		2013 Medical Bills				
Halina Kalinowska MD 800 Biesterfield Rd Elk Grove Village, IL 60007	J					233.00
Account No. 3607		Medical Bill				
Halina Kalinowska MD LLC P.O. Box 967 Tinley Park Tinley Park, IL 60477	J					35.80
Account No. 3281		Medical Bills				
Halina Kalinowska MD LLC P.O. Box 967 Tinley Park Tinley Park, IL 60477	J					62.00
Sheet no. 18 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			476.80

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 00009901871625		2013 Charge Account				961.89
Harris 3800 Golf Road, Suite 300 P.O. Box 5038 Rolling Meadows, IL 60008	J	2012 Medical Bills				22.40
Account No. 54746		2012 Medical Bills				22.40
Hinsdale Gastroenterology 12 Salt Creek Lane Suite 425 Hinsdale, IL 60521	J	2012 Medical Bills				22.40
Account No. 48179		2012 Medical Bills				22.40
Hinsdale Gastroenterology 12 Salt Creek Lane Suite 425 Hinsdale, IL 60521	J	2012 Medical Bills				22.40
Account No. 49399		2012 Medical Bills				22.40
Hinsdale Gastroenterology 12 Salt Creek Lane Suite 425 Hinsdale, IL 60521	J	Medical Bills				22.40
Account No. 67433		Medical Bills				22.40
Hinsdale Gastroenterology 12 Salt Creek Lane Suite 425 Hinsdale, IL 60521	J	Medical Bills				22.40
Sheet no. 19 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				1,051.49

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 41615		2011 Medical Bills				20.00
Hinsdale Gastronterology Associates 911 N Elm St Ste 128 Hinsdale, IL 60521	J	2013 Notice				0.00
Account No. GE11280098	J	2013 Collection				0.00
Hinsdale Internal Med 908 North Elm St Suite 301 Hinsdale, IL 60521	J	2013 Collection				0.00
Account No. 0124002620-47364271	J	2013 Collection/WFD				0.00
HRRG PO Box 5406 Cincinnati, OH 45273	J					
Account No. 15517783	J					
Illinois Collection Service Inc PO Box 1010 Tinley Park, IL 60477-9110	J					
Account No. 876046762 000	J					
Illinois Comprehensive Health Ins 320 West Washington, Suite 700 Springfield, IL 62701	J					
Sheet no. 20 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				20.00

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. Spian000		Medical Bills, Mark D ParisiPsyd & Assoc				
InfoMedix Billing Service 800 E. Northwest Hwy #103 Mount Prospect, IL 60056	J					157.83
Account No. IPC3164163		2013 Notice				
Inpatient Consultants of IL POB 92934 Los Angeles, CA 90009	J					0.00
Account No. 02013085500Y4720X		2013 Medical Bills				
Inpatient Consultants of IL POB 92934 Los Angeles, CA 90009	J					23.00
Account No. 02013085507X7820X		2013 Medical Bills				
Inpatient Consultants of IL POB 92934 Los Angeles, CA 90009	J					66.40
Account No.		Potential breach of contract claim				
Joanne Williams 14151 S. Elm St. Homer Glen, IL 60491	J					Unknown
Sheet no. 21 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				247.23

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE B T O R	Husband, Wife, Joint, or Community					AMOUNT OF CLAIM
			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D		
Account No.		Notice					0.00
John McTigue 5805 W Higgins, 2nd Flr Chicago, IL 60630	J						
Account No. 10482456		2013 Collection					0.00
Malcolm S. Gerald & Assoc. 332 S. Michigan Ave. Suite 600 Chicago, IL 60604	J						
Account No. 6995575		2013 Collection					0.00
Malcolm S. Gerald & Assoc. 332 S. Michigan Ave. Suite 600 Chicago, IL 60604	J						
Account No. 11327592		Collection/Medical Bills					0.00
Malcolm S. Gerald & Assoc. 332 S. Michigan Ave. Suite 600 Chicago, IL 60604	J						
Account No. 013		collection/Alexian Brothers Medical center					0.00
Malcom S. Gerald & Associates 332 S. Michigan #600 Chicago, IL 60604	J						
Sheet no. 22 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)					0.00

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.		Commercial lease personally guranteed				
Mangan Management, Inc. 10735 S. Cicero Suite 109 Oak Lawn, IL 60453	J					0.00
Account No. 7733		2013 Medical Bills				
Matthew Faith DDS 1645 Irving Park Rd Hanover Park, IL 60133	J					35.00
Account No. 417912484548022		2013 Medical Bills				
MEA Elk Grove LLC Po Box 740023 Cincinnati, OH 45274	J					413.00
Account No. 47364271-454-8022		Medical bill				
MEA Elk Grove LLC Po Box 740023 Cincinnati, OH 45274	J					40.63
Account No. 02013077501764D0X		2013 Medical Bills				
MEA Elk Grove LLC Po Box 87904 Dept 2049 Carol Stream, IL 60188	J					45.60
Sheet no. 23 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			534.23

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 0201227650T67370X		2013 Medical Bills				
MEA Elk Grove LLC Po Box 87904 Dept 2049 Carol Stream, IL 60188	J					48.40
Account No. 08-131860934		2013 Collection				
Merchants Credit Guide 223 W. Jackson Chicago, IL 60606	J					0.00
Account No. F00042070219		2013 Collection				
MiraMed Revenue Group Dept 77304 Po Box 77000 Detroit, MI 48277	J					0.00
Account No. G00801997263		2013 Collection				
MiraMed Revenue Group Dept 77304 Po Box 77000 Detroit, MI 48277	J					0.00
Account No.		2013 Medical Services				
Molecular Imaging Inst. 5349 Commerce Blvd. Crown Point, IN 46307	J					40.00
Sheet no. 24 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				88.40

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 3693A5298		2011 Notice				0.00
Molecular Imaging of Suburban PO Box 11276 Belfast, ME 04915	J	Medical Bills				16.00
Account No. 3361458		Utility				0.00
Moore Dermatology Associates 675 W North Ave Melrose Park, IL 60160	J	2013 Collection				0.00
Account No. 20-70-79-4754 3						
Nicor PO Box 5407 Carol Stream, IL 60197	J					
Account No. J17149						
OAC PO Box 371100 Milwaukee, WI 53237-2200	J					
Account No. 01613.00000						
Property Insight 1007 East Cooley Drive Colton, CA 92324	J					
Sheet no. 25 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			16.00

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 8237096080		2013 Medical Bills				
Quest Diagnostics P.O. Box 7306 Hollister, MO 65673	J					24.00
Account No. 229403341		Collection/Sprint				
RPM 20816 44th Ave W Lynnwood, WA 98036	J					498.68
Account No. F00042070219		2012 Medical Bills				
St Alexius Medical Center 22589 Network Place Chicago, IL 60673	J					110.64
Account No. BC10525		2013 Charge Account				
STE Corporation 3049 N Thatcher Ave River Grove, IL 60171	J					300.00
Account No. SPIEV000		2013 Collection				
Suburban Neurologists SC 800 Biesterfield Suite 2009 Elk Grove Village, IL 60007	J					164.40
Sheet no. 26 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,097.72

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. SPIAN001		Medical Bills				
Suburban Neurologists SC 800 Biesterfield Suite 2009 Elk Grove Village, IL 60007	J					161.70
Account No. 3693A5298		2013 Collection				
Transworld System Inc 507 Prudential Rd Horsham, PA 19044	J					0.00
Account No.		Collection				
United Recovery Systems 5800 North Course Drive Houston, TX 77072	J					0.00
Account No. 105703		Utility				
village of Roselle 31 South Prospect Street Roselle, IL 60172	J					0.00
Account No. 0201229050Y52380X		2013 Medical Bills				
village of Roselle 31 South Prospect Street Roselle, IL 60172	J					85.00
Sheet no. 27 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				246.70

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
				C	U	D	
Account No. 0201301550224A50X			2013 Medical Bills				
Walgreen's Corp. 200 Wilmont Rd. Deerfield, IL 60015	J						31.99
Account No. 823785			2013 Medical Bills				
Walgreens Co PO Box 90486 Chicago, IL 60696	J						27.59
Account No. L3480			Utility				
WDT Company 13644 Neutron Rd Dallas, TX 75244	J						0.00
Account No. 4465420199572181			Opened 8/23/06 Credit Card				
Wells Fargo Bank Po Box 14517 Des Moines, IA 50306	J						4,559.00
Account No. 13-149360			2013 Service				
Westmont Fire Dept P.O. box 457 Wheeling, IL 60090	J						100.00
Sheet no. 28 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)			4,718.58
				Total (Report on Summary of Schedules)			276,237.47

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,  
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.  
State whether lease is for nonresidential real property.  
State contract number of any government contract.

Mangan Management, Inc.  
10735 S. Cicero Suite 109  
Oak Lawn, IL 60453

Acct#  
Commercial lease personally guranteed

In re Andrzej Spiewak,  
Eva Spiewak

Case No. \_\_\_\_\_

Debtors

## SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1 Andrzej Spiewak  
 Debtor 2 Eva Spiewak  
 (Spouse, if filing)  
 United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  
 Case number (If known)

Check if this is:

An amended filing  
 A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form B 6I

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	<u>Land surveyor</u>	<u>Self-Employed</u>
Employer's name	<u>Self-Employed</u>	<u>Beauty &amp; Hair Artistry LLC</u>
Employer's address	<u>Roselle, IL 60172</u>	<u>Oak Brook Terrace, IL</u>
How long employed there?	<u>11 years</u>	<u>2 years</u>

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>0.00</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>0.00</u>

Debtor 1 Andrzej Spiewak  
 Debtor 2 Eva Spiewak

Case number (if known)

	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
<b>Copy line 4 here</b>	4. \$ <u>0.00</u>	\$ <u>0.00</u>
<b>5. List all payroll deductions:</b>		
5a. <b>Tax, Medicare, and Social Security deductions</b>	5a. \$ <u>0.00</u>	\$ <u>0.00</u>
5b. <b>Mandatory contributions for retirement plans</b>	5b. \$ <u>0.00</u>	\$ <u>0.00</u>
5c. <b>Voluntary contributions for retirement plans</b>	5c. \$ <u>0.00</u>	\$ <u>0.00</u>
5d. <b>Required repayments of retirement fund loans</b>	5d. \$ <u>0.00</u>	\$ <u>0.00</u>
5e. <b>Insurance</b>	5e. \$ <u>0.00</u>	\$ <u>0.00</u>
5f. <b>Domestic support obligations</b>	5f. \$ <u>0.00</u>	\$ <u>0.00</u>
5g. <b>Union dues</b>	5g. \$ <u>0.00</u>	\$ <u>0.00</u>
5h. <b>Other deductions.</b> Specify: _____	5h.+ \$ <u>0.00</u>	+ \$ <u>0.00</u>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <u>0.00</u>	\$ <u>0.00</u>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. \$ <u>0.00</u>	\$ <u>0.00</u>
<b>8. List all other income regularly received:</b>		
8a. <b>Net income from rental property and from operating a business, profession, or farm</b> Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u>4,000.00</u>	\$ <u>728.00</u>
8b. <b>Interest and dividends</b>	8b. \$ <u>0.00</u>	\$ <u>0.00</u>
8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b> Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <u>0.00</u>	\$ <u>0.00</u>
8d. <b>Unemployment compensation</b>	8d. \$ <u>0.00</u>	\$ <u>0.00</u>
8e. <b>Social Security</b>	8e. \$ <u>0.00</u>	\$ <u>0.00</u>
8f. <b>Other government assistance that you regularly receive</b> Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ <u>0.00</u>	\$ <u>0.00</u>
8g. <b>Pension or retirement income</b>	8g. \$ <u>0.00</u>	\$ <u>0.00</u>
8h. <b>Other monthly income.</b> Specify: _____	8h.+ \$ <u>0.00</u>	+ \$ <u>0.00</u>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <u>4,000.00</u>	\$ <u>728.00</u>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u>4,000.00</u> + \$ <u>728.00</u>	= \$ <u>4,728.00</u>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ <u>0.00</u>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ <u>4,728.00</u>	
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____	
<b>Combined monthly income</b>		

Check if this is:

- An amended filing
- A supplement showing post-petition chapter 13 expenses as of the following date:  

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MM / DD / YYYY
- A separate filing for Debtor 2 because Debtor 2 maintains a separate household

**Official Form B 6J**  
**Schedule J: Your Expenses**

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: **Describe Your Household**

1. **Is this a joint case?**

No. Go to line 2.

Yes. **Does Debtor 2 live in a separate household?**

No

Yes. Debtor 2 must file a separate Schedule J

2. Do you have dependents?  No

Do not list Debtor 1 and  
Debtor 2.

■ Yes. Fill out this information for each dependent.....

**Dependent's relationship to  
Debtor 1 or Debtor 2**

Dependent's age

Does dependent  
live with you?

- No
- Yes
- No
- Yes
- No
- Yes
- No
- Yes

3. Do your expenses include expenses of people other than yourself and your dependents?  No  Yes

## Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

4. **The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

**If not included in line 4:**

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

5. **Additional mortgage payments for your residence**, such as home equity loans

## Your expenses

4. \$ 2,500.00

4a. \$ \_\_\_\_\_ 0.00  
4b. \$ \_\_\_\_\_ 0.00  
4c. \$ \_\_\_\_\_ 0.00  
4d. \$ \_\_\_\_\_ 0.00  
5. \$ \_\_\_\_\_ 0.00

Debtor 1 Andrzej Spiewak  
 Debtor 2 Eva Spiewak

Case number (if known) \_\_\_\_\_

6. <b>Utilities:</b>	6a. Electricity, heat, natural gas	6a. \$ 230.00
	6b. Water, sewer, garbage collection	6b. \$ 30.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 150.00
	6d. Other. Specify: _____	6d. \$ 0.00
7. <b>Food and housekeeping supplies</b>	7. \$ 450.00	
8. <b>Childcare and children's education costs</b>	8. \$ 0.00	
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ 100.00	
10. <b>Personal care products and services</b>	10. \$ 20.00	
11. <b>Medical and dental expenses</b>	11. \$ 50.00	
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 300.00	
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ 0.00	
14. <b>Charitable contributions and religious donations</b>	14. \$ 0.00	
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$ 0.00	
15b. Health insurance	15b. \$ 0.00	
15c. Vehicle insurance	15c. \$ 150.00	
15d. Other insurance. Specify: _____	15d. \$ 0.00	
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ 0.00	
17. <b>Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$ 394.00	
17b. Car payments for Vehicle 2	17b. \$ 320.00	
17c. Other. Specify: _____	17c. \$ 0.00	
17d. Other. Specify: _____	17d. \$ 0.00	
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6l).</b>	18. \$ 0.00	
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. \$ 0.00	
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$ 0.00	
20b. Real estate taxes	20b. \$ 0.00	
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00	
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.00	
20e. Homeowner's association or condominium dues	20e. \$ 0.00	
21. <b>Other:</b> Specify: _____	21. +\$ 0.00	
22. <b>Your monthly expenses.</b> Add lines 4 through 21. The result is your monthly expenses.	22. \$ 4,694.00	
23. <b>Calculate your monthly net income.</b>		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 4,728.00	
23b. Copy your monthly expenses from line 22 above.	23b. -\$ 4,694.00	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ 34.00	
24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.		
Explain: _____		

**United States Bankruptcy Court**  
**Northern District of Illinois**In re Andrzej Spiewak  
Eva Spiewak

Debtor(s)

Case No.

Chapter 7**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 45 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date December 16, 2014Signature /s/ Andrzej Spiewak  
Andrzej Spiewak  
DebtorDate December 16, 2014Signature /s/ Eva Spiewak  
Eva Spiewak  
Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court  
Northern District of Illinois

In re Andrzej Spiewak  
Eva Spiewak

Case No. \_\_\_\_\_  
Chapter 7

Debtor(s)

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

**DEFINITIONS**

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

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**1. Income from employment or operation of business**

None  State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$54,000.00	2014 Gross Income - Year to Date (Joint)
\$33,562.00	2013 Gross Income (Joint)
\$46,383.00	2012 Gross Income (Joint)

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**2. Income other than from employment or operation of business**

None  State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE

**3. Payments to creditors**

None

*Complete a. or b., as appropriate, and c.*

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
------------------------------	------------------------------------	--	-----------------------

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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**4. Suits and administrative proceedings, executions, garnishments and attachments**

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
------------------------------------	-------------------------	---------------------------------	--------------------------

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
---	-----------------	--------------------------------------

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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**5. Repossessions, foreclosures and returns**

None  List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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**6. Assignments and receiverships**

None  a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None  b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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**7. Gifts**

None  List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
--	--------------------------------	--------------	-------------------------------

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**8. Losses**

None  List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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**9. Payments related to debt counseling or bankruptcy**

None  List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Worwag & Malysz, P.C. The Peoples Advocates 2500 E. Devon Ave #300 Des Plaines, IL 60018	2013	Fee \$1,300, \$800 paid.

**10. Other transfers**

None  a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFeree, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
None <input checked="" type="checkbox"/> b. List all property transferred by the debtor within <b>ten years</b> immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.		
NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

**11. Closed financial accounts**

None  List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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**12. Safe deposit boxes**

None  List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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**13. Setoffs**

None  List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

None  List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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**15. Prior address of debtor**

None  If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

**16. Spouses and Former Spouses**

None  If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

**17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None  a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None  b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None  c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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**18 . Nature, location and name of business**

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

LAST FOUR DIGITS OF  
SOCIAL-SECURITY OR  
OTHER INDIVIDUAL  
TAXPAYER-I.D. NO.

NAME	(ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Beauty & Hair Artistry, LLC	46-2762664	1909 Meyers Rd Oak Brook Terrace, IL 60181	Hair salon	5/2013 - present
Beauty Artistry, Ltd.	83-0338519	560 Delton Lane Roselle, IL 60172	Hair salon	2002 - 2013
Anrdew Spiewak Land Surveyor, Inc.	45-5109629	470 Shagbark Court Roselle, IL 60172	Land surveyor	2012 - present
Mctigue & Spiewak, Inc.	36-4157306	5805 W Higgins Ave Chicago, IL 60630	Land surveying	4/1997 - 2012

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

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NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

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**19. Books, records and financial statements**

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
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None

b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
------	---------	-------------------------

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None  d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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**20. Inventories**

None  a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY  
(Specify cost, market or other basis)

None  b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY  
RECORDS

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**21 . Current Partners, Officers, Directors and Shareholders**

None  a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None  b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE  
OF STOCK OWNERSHIP

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**22 . Former partners, officers, directors and shareholders**

None  a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None  b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

---

**23 . Withdrawals from a partnership or distributions by a corporation**

None  If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS  
OF RECIPIENT,  
RELATIONSHIP TO DEBTOR

DATE AND PURPOSE  
OF WITHDRAWAL

AMOUNT OF MONEY  
OR DESCRIPTION AND  
VALUE OF PROPERTY

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**24. Tax Consolidation Group.**

None  If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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**25. Pension Funds.**

None  If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \*

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 16, 2014

Signature /s/ Andrzej Spiewak  
Andrzej Spiewak  
Debtor

Date December 16, 2014

Signature /s/ Eva Spiewak  
Eva Spiewak  
Joint Debtor

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*

**United States Bankruptcy Court  
Northern District of Illinois**

In re Andrzej Spiewak  
Eva Spiewak

Case No.  
Chapter 7

Debtor(s)

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A** - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
<b>Creditor's Name:</b> Bmo Harris Bank	<b>Describe Property Securing Debt:</b> 2011 Nissan Versa
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt	
Property No. 2	
<b>Creditor's Name:</b> Nissan Motor Acceptance	<b>Describe Property Securing Debt:</b> 2011 Nissan Altima
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input checked="" type="checkbox"/> Not claimed as exempt	

Property No. 3	
<b>Creditor's Name:</b> Wells Fargo Home Mortgage	<b>Describe Property Securing Debt:</b> Real Estate Located at 470 Shagbark Court, Roselle IL 60172
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt	

**PART B** - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
<b>Lessor's Name:</b> -NONE-	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

**I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.**

Date December 16, 2014

Signature /s/ Andrzej Spiewak  
Andrzej Spiewak  
Debtor

Date December 16, 2014

Signature /s/ Eva Spiewak  
Eva Spiewak  
Joint Debtor

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re Andrzej Spiewak  
Eva Spiewak

Debtor(s)

Case No.  
Chapter 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <u>1,600.00</u>
Prior to the filing of this statement I have received .....	\$ <u>800.00</u>
Balance Due .....	\$ <u>800.00</u>

2. The source of the compensation paid to me was:

Debtor  Other (specify):

3. The source of compensation to be paid to me is:

Debtor  Other (specify):

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: December 16, 2014

/s/ Michael J. Worwag

Michael J. Worwag  
Worwag & Malysz, P.C.  
The Peoples Advocates  
2500 E. Devon Ave #300  
Des Plaines, IL 60018  
847.954.2350 Fax: 847.954.2755  
mjworwag@gmail.com

**WORWAG & MALYSZ, P.C.**  
a d b a The Peoples Advocates  
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2500 E. Devon Ave #300  
Des Plaines, Illinois 60018  
Phone: 847.533.3303 Email: [mjworwag@gmail.com](mailto:mjworwag@gmail.com)

6500 W. Archer Ave.  
Chicago, Illinois 60638  
Phone: 773.586.4010 Fax: 847.954.2755

Retainer for Legal Services

**Chapter 7- Eliminates dischargeable unsecured debts. Certain debts may not be dischargeable.**

**Your fee for our services is \$ 1600. This is a "flat fee" of which half is for services rendered prior to your case being filed and the other half is for services rendered after your case is filed. Any portion of the retainer not earned will be refunded to you.**

**Today you paid \$ 800.**

**You agree to pay the balance of \$ 800 by the date of the trustee meeting.**

**Filing Fee- You will also provide a separate payment for \$306.00. The \$306 filing fee is a separate cost and is not included in the fee that you were quoted for our services and must be paid before we file.**

This agreement will serve as an engagement agreement that will establish the terms of our relationship. When you sign it, it will become a contract between us. In passing the Bankruptcy Abuse Prevention and Consumer Protection Act of 2005, the Congress imposed strict requirements upon attorneys representing debtors, requiring them to specify what duties they will perform and to make certain representations to clients. Those specific duties and representations are set out in the representation agreement. Please read this agreement carefully and be sure you understand it. If you have any questions, you should consult with me before signing. Once you are satisfied with the agreement, please sign and return a copy to me. The following are the specifics of our proposed representation. We will:

1. Meet with you to discuss your financial situation and possible solutions;
2. Provide the section 342(b)(1) notice, which sets out the purpose, benefits, and costs of filing under Chapters 7, 11, 12 or 13; the types of services available from credit counseling agencies; and the penalties of committing certain bankruptcy crimes, and will explain the notice to you;
3. Prepare the necessary bankruptcy petition, schedules, statement of affairs, and other documents, and review and file the bankruptcy case under the chapter you select;
4. Prepare for and accompany you to the section 341 first meeting of creditors;
5. Assist in the amendments to the papers filed and the production of such documents as the trustee requests;
6. Assist you in the negotiation and execution of reaffirmation agreements that are in your best interest and meet all requirements of the law.

**FULL DISCLOSURE- You agree that you will fully disclose all financial information. You agree to disclose ALL of your assets, debts and income and understand that it is a Federal crime to omit any other information from your bankruptcy petition punishable by fine of up to \$500,000 or imprisonment for up to 5 years or both. You also agree to provide our office with proof of your income for the last six months and your tax returns for the previous two (2) years.**

**FINANCIAL MANAGEMENT AND CREDIT COUNSELING COURSES- Under the new law you are required to take a Credit Counseling Course prior to the filing of your bankruptcy petition and a Financial Management Course prior to the discharge of your bankruptcy for an**

**ADDITIONAL FEE (usually no more than \$100). If you fail to complete these courses your bankruptcy will be denied.**

Attached are notices and information I am required to give you by law. Please read all information.

**Debt Relief Agency Disclosures to an Assisted Person**

Section 527 of the Bankruptcy Code requires a Debt Relief Agency to provide an assisted person with the following:

1. A copy of the notice prepared by the clerk of the Bankruptcy Court, in accordance with the requirements of § 342(b), which is attached hereto and which contains:
  - (1) a brief description of
    - (A) Chapters 7, 11, 12, and 13 and the general purpose, benefits, and costs of proceeding under each of those chapters; and
    - (B) the types of services available from credit counseling agencies; and
  - (2) statements specifying that
    - (A) a person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury in connection with a case under this title shall be subject to fine, imprisonment, or both; and
    - (B) all information supplied by a debtor in connection with a case under this title is subject to examination by the Attorney General.
2. The following disclosures are required by § 527(a)(2), which advises an assisted person that:
  - (A) all information that the assisted person is required to provide with a petition and thereafter during a case under this title is required to be complete, accurate, and truthful;
  - (B) all assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in § 506 must be stated in those documents where requested after reasonable inquiry to establish such value;
  - (C) current monthly income, the amounts specified in section 707(b)(2), and, in a case under Chapter 13 of this title, disposable income (determined in accordance with § 707(b)(2)) are required to be stated after reasonable inquiry; and
  - (D) information that an assisted person provides during his or her case may be audited pursuant to this title, and failure to provide such information may result in dismissal of the case under this title or other sanction, including a criminal sanction.

If you have any questions about any of these disclosures, we will be happy to provide further explanation.

We also call your attention to Exhibits A and B attached to the Representation and made a part thereof.

EXHIBIT A

**Separate Disclosure Required by Section 527 of the Bankruptcy Code as Amended**

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY

(Note: This form is mandated by statute. It may or may not correctly explain the law.)

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. **The law requires an attorney or bankruptcy petition preparer to give you a written contract specifying what the attorney or bankruptcy petition preparer will do for you and how much it will cost.** Ask to see the contract before you hire anyone.

The following information explains what must be done in a routine bankruptcy case to help you evaluate how much service you need. Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and decide which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents (Petition, Schedules, Statement of Financial Affairs, and in some cases a Statement of Intention) must be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you must attend the required first meeting of creditors, where you may be questioned by a court official called a "trustee" and by creditors.

If you choose to file a Chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a Chapter 13 case, in which you repay your creditors what you can afford over 3 to 5 years, you may also want help preparing your Chapter 13 plan and with the confirmation hearing on your plan, which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than Chapter 7 or Chapter 13, you should consult someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only lawyers, not bankruptcy petition preparers, can give you legal advice.

Client hereby acknowledges receipt of a copy of this disclosure.

EXHIBIT B

**Information to the Assisted Person (Debtor) on How to Provide All Information Required by Section 521**

Section 521 of the Code sets out the Debtor's duties related to the filing of a bankruptcy case. A copy of the section is attached to this writing.

As you fill out these schedules and statement of affairs, you should keep the following in mind:

1. Completing the income and expense pages accurately and completely is critical.
  - (a) To compile your income, refer to recent pay stubs and last year's income tax returns. Accounting for overtime, investment dividends, and other earnings is necessary.
  - (b) People usually pay cash for many items, such as groceries. Review your monthly expense payments and make a best estimate on cash expenditures. If you pay insurance annually, calculate the monthly cost. Attached are IRS expense allowances for the area in which you live. If your expenses exceed these, we will have to review them and perhaps make adjustments.
  - (c) When you value property you own, consider prices in the neighborhood for housing, in newspapers and car lots for automobiles, and what you would pay for furniture and clothes at a business selling such goods.
  - (d) If you have an item of special value, an appraisal may be necessary.
  - (e) When listing creditors, collect current bills and use that information for mailing addresses and balances due.
  - (f) Under the law of this state, or federal bankruptcy law, certain property may be exempt and may be retained. Attached is a copy of the state list of exemptions and also a list of property that may be exempt under federal law. Neither list is all-inclusive. If a seller has a lien on exempt property, the lien may be avoidable or you may have to pay for the property in order to keep it. After you have prepared these lists, we can review them and decide what property qualifies as exempt.

**ADDITIONAL FEES-** The *only* reason that you may be charged additional fees is a) *Failing to list debts* at time of filing that later have to be added to your bankruptcy documents. There is a \$100 charge to amend your petition, b) *Missing court date*. You must attend a meeting of creditors approximately 4 - 6 weeks after your case is filed. I still have to appear if you cannot, so there will be a \$100 additional fee for a missed court date. c) *Adversary objections* to discharge debts based on fraudulent use of credit cards or other dischargeability issues. Fee for litigating a dischargeability issue is \$150 per hour, five hours to be paid in advance if we decide to represent you. d) *Lien avoidance*. You agree that the above quoted fee does not include services provided to avoid judgment liens (\$200) and non-purchase money security interests (\$150). You understand and agree that if you do not pay the fee, I will not bring the motion and the lien will survive the bankruptcy. **Reaffirmations-** Once you reaffirm a debt, you may only rescind the reaffirmation agreement by contacting our office no less than two weeks prior to the bar date for rescissions. You may only reaffirm a debt if it does not impose an undue hardship to you.

<u>Secured Debts</u>	<u>Unsecured Debts</u>	<u>Non-Dischargeable</u>
Mortgage Arrears-		Tax-
Mortgage Balance-		Student Loans-
Car Balance-		Gov't Fines-
Loans-		Misc-
<b>Total Secured \$</b> _____	<b>Total Unsecured</b> _____	<b>Total Non-Disc \$</b> _____

**What you must provide before I file your case: (I cannot file without this information!)**

- Your state and federal income tax returns for the prior 2 years and W2 Stubs.
- Your most recent pay stubs from all employers, and records concerning your earnings for the past 6 months from all sources
- All bills from all creditors for the past 90 days so that we may determine the proper place to send notice.
- All loan documents for all secured loans, including home loans and auto loans
- Your social security card
- Your photo identification card
- List of your household income and expenses
- Details concerning every item of property you own, including real estate and personal property
- Details concerning any litigation in which you involved now or in which you may be involved in the future.
- Information on any inheritance you may have received, expect to receive or trust as to which you are or may be a beneficiary
- Information on all insurance policies
  - Credit Counseling Certificate

I hereby acknowledge that I/We have read and reviewed this 5 page retainer/representation agreement and I/we understand all of its contents.

X Clint F. Damm 12/14/14 X Eva Spina 12/14/14  
Client Date Client Date

X Worwag & Matysz, PC  
Attorney on behalf of Worwag & Matysz, PC

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

**Bankruptcy Code.**

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court  
Northern District of Illinois**

In re Andrzej Spiewak  
Eva Spiewak

Debtor(s)

Case No.

Chapter 7

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Andrzej Spiewak  
Eva Spiewak

Printed Name(s) of Debtor(s)

Case No. (if known) \_\_\_\_\_

/s/ Andrzej Spiewak

December 16, 2014

Signature of Debtor

Date

/s/ Eva Spiewak

December 16, 2014

Signature of Joint Debtor (if any)

Date

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**Instructions:** Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court  
Northern District of Illinois**

In re Andrzej Spiewak  
Eva Spiewak

Debtor(s)

Case No.  
Chapter 7

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors: 89

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: December 16, 2014

/s/ Andrzej Spiewak  
Andrzej Spiewak  
Signature of Debtor

Date: December 16, 2014

/s/ Eva Spiewak  
Eva Spiewak  
Signature of Debtor

ACI  
35A Rust Lane  
Boerne, TX 78006

Advocate Health and Hospitals  
1775 Dempster St  
Park Ridge, IL 60068

Advocate Medical Group  
75 Remittance Dr Suite 1773  
Chicago, IL 60675

Alcoa Billing Center  
3429 Regal Dr.  
Alcoa, TN 37701

Alexian Brother Medical Center  
22589 Network Place  
Chicago, IL 60673

Alexian Brothers  
800 Biesterfield Road  
Elk Grove Village, IL 60007-3397

Alexian Brothers Behavioral Health  
21272 Network Place  
Chicago, IL 60673

Alexian Brothers Med. Center  
800 Biesterfield Road  
Elk Grove Village, IL 60007

Alexian Brothers Medical Center  
22589 Network Place  
Chicago, IL 60673

Alexian Brothers Medical Group  
PO Box 5588  
Belfast, ME 04915

Alexian Ctr for Mental  
3436 N Kennicott Ave  
Arlington Heights, IL 60004

Alliance Laboratory Physicians LTD  
PO Box 5967  
Carol Stream, IL 60197

American Express  
PO Box 0001  
Los Angeles, CA 90096

Amex  
Po Box 297871  
Fort Lauderdale, FL 33329

ARC Disposal-Republic SVC# 551  
P.O. Box 9001154  
Louisville, KY 40290

ARS  
P.O. Box 630806  
Cincinnati, OH 45263

AT & T  
PO Box 5080  
Carol Stream, IL 60197

AT&T Mobility  
PO Box 6463  
Carol Stream, IL 60197

ATG Credit LLC  
PO Box 14895  
Chicago, IL 60614-4895

Bank Of America  
Po Box 982235  
El Paso, TX 79998

Bmo Harris Bank  
Po Box 94034  
Palatine, IL 60094

Capital Management Services LP  
698 1/2 S Ogden St  
Buffalo, NY 14206

Capital One  
Po Box 85520  
Richmond, VA 23285

Cardiovascular Associates  
25883 Network Place  
Chicago, IL 60673

CBE group  
1309 Technology Pkwy  
Cedar Falls, IA 50613

Chase  
PO Box 901039  
Fort Worth, TX 76101

Chase Bank  
340 S Cleveland Ave Bldg 370  
Westerville, OH 43081

Citi Com Lending Grp/A  
Po Box 769004  
San Antonio, TX 78245

Citibank  
P.O. Box 15109  
Wilmington, DE 19850

Com Ed  
PO Box 6111  
Carol Stream, IL 60197

Comcast  
P.O. Box 3002  
Southeastern, PA 19398-3002

Commerce Bank  
Po Box 411036  
Kansas City, MO 64141

Computer Credit Inc  
640 W Fourth Street  
PO Box 5238  
Winston Salem, NC 27113

Core Orthopedics & Sports Medicine  
PO Box 51  
Palatine, IL 60078

Credit Collection Services  
2 Wells Ave  
Newton Center, MA 02459

Creditors Discount  
415 E. Main St.  
Streator, IL 61364

Direct TV  
P.O. Box 78626  
Phoenix, AZ 85062

Diversified Consultants, Inc  
P.O. Box 1117  
Phoenix, AZ 85062

DuPage Medical Group  
15921 Collections Center Drive  
Chicago, IL 60693

Dupage Medical Group LTP  
430 Pennsylvania Ave  
Glen Ellyn, IL 60137

DX Medical & Physical Clinic  
7601 W Montrose Ave  
Harwood Heights, IL 60706

Elk Grove Radiology  
75 Remittance Dr. Suite 6500  
Chicago, IL 60675

Elk Grove Radiology SC  
9410 Compubill Dr  
Orland Park, IL 60462

Euler Hermes UMA  
600 South 7th Street  
Louisville, KY 40201

Faith Dental Group LTD  
Matthew J. Faith DDS  
1645 Irving Park  
Hanover Park, IL 60133

Family Medical Center Westchester  
2434 S Wolf Rd  
Westchester, IL 60154

Financial Corporation of Austin  
PO Box 203500  
Austin, TX 78720

First Source  
205 Bryant Wood South  
Buffalo, NY 14228

Halina Kalinowska MD  
800 Biesterfield Rd  
Elk Grove Village, IL 60007

Halina Kalinowska MD LLC  
P.O. Box 967  
Tinley Park  
Tinley Park, IL 60477

Harris  
3800 Golf Road, Suite 300  
P.O. Box 5038  
Rolling Meadows, IL 60008

Hinsdale Gastroenterology  
12 Salt Creek Lane  
Suite 425  
Hinsdale, IL 60521

Hinsdale Gastroenterology Associates  
911 N Elm St Ste 128  
Hinsdale, IL 60521

Hinsdale Internal Med  
908 North Elm St  
Suite 301  
Hinsdale, IL 60521

HRRG  
PO Box 5406  
Cincinnati, OH 45273

Illinois Collection Service Inc  
PO Box 1010  
Tinley Park, IL 60477-9110

Illinois Comprehensive Health Ins  
320 West Washington, Suite 700  
Springfield, IL 62701

InfoMedix Billing Service  
800 E. Northwest Hwy #103  
Mount Prospect, IL 60056

Inpatient Consultants of IL  
POB 92934  
Los Angeles, CA 90009

Joanne Williams  
14151 S. Elm St.  
Homer Glen, IL 60491

John McTigue  
5805 W Higgins, 2nd Flr  
Chicago, IL 60630

Malcolm S. Gerald & Assoc.  
332 S. Michigan Ave.  
Suite 600  
Chicago, IL 60604

Malcom S. Gerald & Associates  
332 S. Michigan #600  
Chicago, IL 60604

Mangan Management, Inc.  
10735 S. Cicero Suite 109  
Oak Lawn, IL 60453

Matthew Faith DDS  
1645 Irving Park Rd  
Hanover Park, IL 60133

MEA Elk Grove LLC  
Po Box 87904 Dept 2049  
Carol Stream, IL 60188

Merchants Credit Guide  
223 W. Jackson  
Chicago, IL 60606

MiraMed Revenue Group  
Dept 77304  
Po Box 77000  
Detroit, MI 48277

Molecular Imaging Inst.  
5349 Commerce Blvd.  
Crown Point, IN 46307

Molecular Imaging of Suburban  
PO Box 11276  
Belfast, ME 04915

Moore Dermatology Associates  
675 W North Ave  
Melrose Park, IL 60160

Nicor  
PO Box 5407  
Carol Stream, IL 60197

Nissan Motor Acceptance  
Po Box 660360  
Dallas, TX 75266

OAC  
PO Box 371100  
Milwaukee, WI 53237-2200

Property Insight  
1007 East Cooley Drive  
Colton, CA 92324

Quest Diagnostics  
P.O. Box 7306  
Hollister, MO 65673

RPM  
20816 44th Ave W  
Lynnwood, WA 98036

St Alexius Medical Center  
22589 Network Place  
Chicago, IL 60673

STE Corporation  
3049 N Thatcher Ave  
River Grove, IL 60171

Suburban Neurologists SC  
800 Biesterfield Suite 2009  
Elk Grove Village, IL 60007

Transworld System Inc  
507 Prudential Rd  
Horsham, PA 19044

United Recovery Systems  
5800 North Course Drive  
Houston, TX 77072

village of Roselle  
31 South Prospect Street  
Roselle, IL 60172

Walgreen's Corp.  
200 Wilmont Rd.  
Deerfield, IL 60015

Walgreens Co  
PO Box 90486  
Chicago, IL 60696

WDT Company  
13644 Neutron Rd  
Dallas, TX 75244

Wells Fargo Bank  
Po Box 14517  
Des Moines, IA 50306

Wells Fargo Home Mortgage  
8480 Stagecoach Circle  
Frederick, MD 21701

Westmont Fire Dept  
P.O. box 457  
Wheeling, IL 60090